

Get to know our leaders: CFO Chris Knackstedt hopes to help Group Health scale new heights

Check out this new series of executive leader profiles to get a glimpse of the people we see listed in the boxes of the top-level org chart.

We know the [executive leadership team](#) is responsible for overall strategy and performance, but it's also fun to learn a little more about who these leaders are. Up next: [Chris Knackstedt](#) (pictured in Nepal in the cover photo and below), who joined Group Health last April.

Q. How did you choose a career in health care finance?

A. I wanted to work internationally, and the available jobs were in accounting and finance. So I got my bachelor's in accounting, and later an MBA, then landed a job in public accounting for international firms with Mexican operations. It was happenstance that I got into health care finance. One of my first clients was a hospital system that ultimately hired me as director of contract compliance. Over the next seven years, I became their assistant Chief Financial Officer (CFO), and then CFO.

Q. What were early influences in your career?

A. The CEO at the first health system I worked for took an interest in me and showed me the ropes. I was young, but he saw my potential. It was there that I learned an organization doesn't have to be a nonprofit to have a high level of integrity and values.

Q. What attracted you to Group Health?

A. I've worked on both care delivery and insurance sides of health care finance, and Group Health's integrated system combines the best of both worlds. It might cost more upfront for a clinician to spend a little extra time with a patient, but investing that extra time may result in health problems being caught early—or avoided entirely—that could be expensive. As a delivery system and health plan, we're in a better position to do the right thing for our members and patients than if we were just a delivery system or just a health plan.

Q. How do you describe your job to someone you just met?

A. It feels similar to an air traffic controller's job in that our group is continually balancing multiple factors with very high stakes. As CFO, I have ultimate responsibility for managing billions of dollars of premiums and cash, setting premium rates more than a year in advance, and capturing everything from an accounting perspective. But it's very much a team effort. We have a tremendous depth of financial expertise within our division, and I rely on this incredible group to forecast where the health care market—and rates—are going in the coming years, recommend how we should invest our funds, and analyze where we are today and what course corrections may be needed. Then we collectively bring those puzzle pieces together to make decisions.

Q. What is your leadership approach?

A. I've been here close to a year, and I'm still doing a lot of listening and learning. But I'm also asking a lot of questions. Why do we do things the way we do, and can we uncover better ways to make us more efficient and cost-effective? I try to make myself available to the organization's leaders, and help remove financial barriers to the things they want to accomplish.

Q. What are your most immediate challenges?

A. We have a great organization, with incredible outcomes. But our cost of care is still too high. We need to find ways to reduce costs without impacting the quality of care or the care experience. That takes using the power of and: Finding ways to provide the best care and provide highly competitive rates. I believe we can do that.

Q. What leadership insights have you gained during your career?

A. The best leaders I've worked with have been direct and honest. It's never easy to admit that you're not going to meet your targets, but they held themselves accountable. They looked for opportunities to improve. They took a curve ball, adjusted to it, and executed for the best outcome. I've also learned that the best intentions are meaningless if you just talk about them. You've got to execute to them. Evidence-based medicine is a good example of this, and is why I'm happy to be a part of Group Health.

Q. What do you enjoy doing outside of work?



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A. Anything that's outdoors and a little adventurous. My wife and I have trekked in Nepal. In fact, in my photo I'm on a peak in Nepal. (I had on all my cold-weather gear and I've never been so cold in my whole life.) We've also traveled in Thailand, India, and Australia. We like hiking and cycling, and have gotten into kayaking since moving to the Northwest. We also love to cook. Well, my wife cooks. I eat and do the dishes.

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Get to know our leaders: Diana Birkett Rakow leads team of diverse advocates

The EVP of Marketing & Public Affairs, and president of the Foundation, talks about policymaking, her team's role in driving Group Health's mission, parenting, and ice hockey.

We know the [executive leadership team](#) is responsible for overall strategy and performance, but it's also fun to learn a little more about who these leaders are. Up next: [Diana Birkett Rakow](#), pictured right with son Gus.



Q. What were early influences in your life?

A. I had a phenomenal art teacher in high school who encouraged me to build a bigger canvas, try new things, and push myself outside my comfort zone. I've continued to do that throughout my life.

Q. What led you from a BA in chemistry to a specialty in public health policy?

A. Both my father and grandfather were doctors, and I originally planned on going into medicine. But they spoke very honestly about the direction health care was heading, and reminded me that there were many ways to have an impact. I minored in art and considered careers in painting and in art conservation.

But what stood out for me in college was my work running a health counseling and resource program. So I launched into public health advocacy, graduate study in public health and public administration, and a post-graduate health policy fellowship in Washington, D.C. From there I got a job with the U.S. Senate Finance Committee.

Q. What did you value most about the fellowship?

A. I got to see how health policy really gets made in D.C. You can have the very best idea that's absolutely the right thing to do, but in order to actually get things done you also need to bring people together, learn from different perspectives, compromise, and make decisions.

Q. Why the switch from D.C. politics to Group Health?

A. I saw politics becoming less collaborative and more personal. I wanted to find a place where I could help solve problems with talented, dedicated people, rather than throw stones. I'd heard good things about Group Health while I was in grad school at the UW, and I feel privileged to have a chance to learn from and represent this organization. I know we have a lot of work to do, but it's exciting to see—and be part of—the progress that we're making. I believe we have the best model for truly serving and supporting people's health care needs.

Q. How has your role changed since joining Group Health in 2006?

A. I started out as director of Federal Relations & Policy, representing Group Health in Washington, D.C. I loved my job, but was a team of one. Several jobs later, now as EVP of Marketing & Public Affairs, and president of the Group Health Foundation, I work with a large and diverse team—but the objective is still the same: to create an environment where Group Health can achieve its mission of improving lives by improving health, and where our business can thrive.

Q. What do you see as the similarities between Marketing, Public Affairs, and the Foundation?

A. We're all advocates, educators, translators, motivators, and storytellers. Each department brings a similar but different set of tools to the table to describe the value of Group Health's services and products, help consumers make smart health care decisions, translate and influence health care policies, engage and inform our colleagues about what's going on around Group Health, and leverage the generosity of grateful patients to support programs and initiatives that make our communities healthier.

We're at our best when this talented group collaborates closely and draws on each other's expertise and perspectives. Working together, we maximize our ability to tell Group Health's story simply and powerfully, to distinguish Group Health in a meaningful way, and to help our organization advance its mission and achieve its goals.

Q. What might staff find surprising about you?

A. I like to paint landscapes and abstracts, although I haven't done that in a while. And I used to play ice hockey.

Q. What do you enjoy doing in your free time?

A. I have an 18-month-old son, Gus. That pretty much says it all. We throw balls, climb stairs, and make noise. But I also enjoy yoga, and traveling. My husband and I took a wonderful trip to India before Gus was born. Traveling, and now Gus, help me shift my perspective and remember not to sweat the small stuff.



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Q. Is Washington, D.C. really like Netflix's House of Cards?

A. It's not really so dark. But the show is fun in the way it captures the machinations of who knows whom and how you get things done. Reality is somewhere between House of Cards and The West Wing. President Jed Bartlet from The West Wing is my fictional hero.

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Get to know our leaders: Erin Leff

One of our newest executive vice presidents discusses her career path at Group Health, her goals and passions, and the calming power of ballet.

In 12 years, you've risen from primary care project manager to EVP of the Group Practice Division. What have been memorable milestones along the way?

One huge opportunity was serving as project director of the East King County project around 2004. We formed a partnership with Overlake Hospital, purchased land and built a major multispecialty center adjacent to Overlake's facility, and then closed our Eastside Hospital. It was very high-visibility, strategic work, and gave me a chance to get to know many people and processes within our organization and the community.



Other positions I've held include vice president of specialty services, and most recently vice president of our North Region, which includes Seattle and East King and Snohomish counties. Both those jobs deepened my insight into the group practice and gave me a good grounding for my current responsibilities.

You were vice president of the North Region for only about six months. What was your reaction to being offered the EVP position?

I've always been eager to play at the highest level possible, where I can have the most impact, so when Scott Armstrong offered me this position my answer came very easily: Yes! I enjoy the intellectual stimulation involved in figuring out how to make our big, complicated business model sustainable and successful.

Can you give us an idea of the scope of your current job?

Steve Tarnoff and I oversee the entire group practice, including all our medical centers. We drive the basic tenets of the group practice: service, access, quality, staff engagement, and affordability. I have direct line accountability for about 4,000 staff and a budget of \$800 million.

What are your biggest priorities?

There are two. The first is to stabilize the group practice. Our delivery system has been through so many changes, and teams are feeling it. It's indicative in our staff engagement scores, and in comments we hear when we're out rounding at our medical centers. We need to give staff the reassurance, stability, and freedom they need to focus on providing great care and service. And we need to stay the course on our improvement work.

My second priority is to keep an eye on growth, expansion, and innovation. Group Health is losing market share in a region that's growing like mad. We need to focus on how we can think differently about our continuum of care, and articulate a vision that will help us become more relevant in this evolving market.

Are there certain qualities you believe are needed for effective leadership?

It's so important to treat people with kindness and respect. You have to be direct and honest about difficult topics. You have to admit when you screw up. And, while it's necessary to have a point of view and an opinion on important topics, you have to be open to hearing diverse viewpoints, and willing to morph your position based on good input.

How has your leadership style evolved?

I've gotten better at having hard discussions. I used to be more conflict averse. Now I have a clearer

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understanding that my first priority is making sure our business is successful. But that doesn't make the difficult conversations any easier, and we're having a lot of those conversations these days.

I've also found that everyone, no matter what their level, has some development goal or target they need to work toward, and something they're struggling with. I've learned that a hands-off approach is not an effective way to manage, and that being a deliberate mentor to my direct reports is an important part of my job.

What strengths do you bring to your job?

I'm an eternal optimist. Life is short and I tend to be enthusiastic and happy. I'm also a natural collaborator and an effective communicator.

What do you think is Group Health's greatest strength?

Our mission and values. It's what binds this organization together through all our ups and downs. It's what attracts the really bright, thoughtful, passionate people who make it a joy to work here. If we can find ways to articulate our value and relevance in the market, and innovate and grow, our mission and values will help us weather whatever's ahead of us.

How do you relax in your free time?

I go to ballet class. I've been taking ballet since I was 4 years old, and it's always been an incredibly calming influence in my life. It's what I do for my mental health, and it's cheaper than a therapist.

I'm also crazy in love with my family—my 6-year-old daughter, my husband, and my dog. I spend as much time as I can with them, hiking, camping, and just getting outside. I believe in working hard, and playing hard.

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Get to know our leaders: Tami Lamp

A passion for treating people right is what led Tami Lamp, our executive vice president of Human Resources, to a varied career in HR leadership.

What were some early influences in your life?

At age 13, I had a job that involved taking the bus between coin-operated laundry facilities on Saturdays, collecting the coins, and rolling them—endlessly, it seemed. This taught me about responsibility and hard work. As a downhill ski racer and violinist, I learned discipline and the value of practice. From age 13 to 17, I lived at an all-girls boarding school with four girls per room. Teamwork and collaboration were a must, and I learned how to get along with just about anybody. Unfortunately, a car accident taught me about facing adversity, then getting up and going on.



You started out as a pilot and flight instructor back in 1989. How did you get from there to HR leadership?

My dad was a civil engineer in the Air Force, and later he learned to fly. I'm the oldest of five kids and flying was something my dad and I did together. It was a huge passion and focus of all my time and energy. That changed suddenly when a head injury from the car accident I mentioned caused me to get motion sickness when I flew. That's not good for a pilot, and a career change was in order. Eventually I discovered my love of HR, after learning that there's a formal science around good people management, negotiations, employees relations, and how to be a great leader.

What attracted you to an HR job at Starbucks?

In the mid-1990s, while living in Vancouver, B.C., I heard about Howard Schultz, the owner of a small coffee company in Seattle who gave employees a pound of coffee a week and paid benefits to part-time workers. His approach intrigued me, so right out of HR graduate school I went after a job there and became their second recruiter. In the five years I spent with Starbucks in various roles, our goal was to open a store a day, and the company grew from 700 to 45,000 employees. It was an amazing work environment. We had less than 60 percent attrition per year when comparable chains had more than 200 percent attrition per year.

How did you end up in health care?

Starting in 2003, I spent nine years at Microsoft in various HR leadership roles. During that time, my father was diagnosed with a terminal illness, and the lack of integrated health care data made it really hard and frustrating to help manage his care. I wanted to do something about that and shared my passion on the topic with my colleagues at Microsoft. When Microsoft's health care platform was spun out in 2012 to create the Caradigm Corporation, a joint venture between Microsoft and General Electric that focused on population health management software for the health care industry, I accepted the position of chief people officer.

Did that role provide any insights into health care?

It taught me a lot about hospital systems and data integration in a health care setting, and I became even more familiar with the health care industry, processes, roles, and data challenges. The leadership and teams there were very unhappy about being spun out of large companies into a small start-up, but within two years we went from having a very unhappy employee group to having an extremely positive group.

Group Health's integrated care and incredible service was well known in my circles. When I was eventually ready to move more deeply into health care, a friend told me there was a job opening here, and I applied. I love it here.

What have you found are keys to keeping an organization's staff happy?

There are several keys. The first is the people we work with. The second is the information we receive from the people we work with, both directly and indirectly, including through the organization's policies and procedures. The third is recognition and appreciation. It doesn't matter what we do—everyone likes to be recognized and appreciated in their own special way.

If you have a happy staff and happy customers, you have a great business. If you don't have one or the other, you've got problems.

When you're hiring for a leadership position, what qualities do you look for?

Strong listening and collaboration skills. A positive attitude. A sense of humor, and the ability to inspire. A good leader must be able to look into the future and chart an inspirational path there for everyone to follow. I find that a good leader is also more interested than interesting.

Is there anything that would surprise people about you?

My hobbies might be surprising. They include wake boarding and wake surfing, and athletic events like Tough Mudders, which is like a military boot camp that includes fundraising to benefit our military. Spending time



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with my family—my husband of 25 years, our two teenage daughters, two dogs, and two cats—is also a big priority. One of my daughters loves horses. The other likes rowing (pictured above with Lamp), so you'll see us at equestrian events and regattas. I also love to fish, sew, knit, garden, and cycle.

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Lindsay, Teri 8/14/2015 1:42 PM

The story written on Tami Lamp is amazing it give me a feeling of things are changing ! I say this because she opens up about her work life jouney and family life, I feel I know her. Yes, others have shared but this is different there is something about her story that interest me ! I look forward to hearing more about her jouney as she moves up ! Thank you for sharing and welcome !



Yeoman, Michelle 8/11/2015 9:10 AM

Inspiring!



Moore, Erin 8/11/2015 8:45 AM

Very inspirational Tami!

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